United Nations E/CN.9/2007/4

Economic and Social Council

Distr.: General
28 December 2006

Original: English

Commission on Population and Development
Fortieth session
9-13 April 2007
Item 3 of the provisional agenda*
Follow-up actions to the recommendations of the International Conference on Population and Development

Monitoring of population programmes, focusing on the changing age structures of populations and their implications for development

Report of the Secretary-General

Summary

The present report on the monitoring of population programmes, focusing on the changing age structures of populations and their implications for development, has been prepared in response to the topic-oriented and prioritized multi-year work programme of the Commission on Population and Development, which had been endorsed by the Economic and Social Council in its resolution 1995/55. By its decision 2005/1, the Commission decided that the changing age structures of populations and their implications for development should be the special theme for the fortieth session of the Commission.

The report documents the change in the age structure of populations, pointing out that the current demographic situation is unique in that it encompasses both the largest youth and the largest elderly populations. While the numbers of children and youth were historically always large, the large numbers and proportion of older persons are a twentieth-century phenomenon.

* E/CN.9/2007/1.

06-68514 (E) 160107

The report examines the social and economic implications for development of the changing age structures of populations, especially the unprecedented numbers of older persons, and points out that the needs of all groups in society, both young and old, must be met. Until recently, most Governments focused their attention on the growth and needs of the younger generation and little attention was paid to the ever-increasing numbers of older persons. It was assumed that the family would take care of its elderly members and most Governments gave low priority to the concerns of older persons. Historically, family planning and infant, child and maternal mortality were the focus of population policies and programmes, and older people's needs were not on the agenda.

The report describes the United Nations Population Fund's Framework for Action on Adolescents and Youth as well as the Fund's programmatic work to assist countries in responding to the challenges of population ageing.

Contents

		Paragraphs	*Page*
I.	Introduction	1–2	4
II.	Current demographic situation	3–7	4
III.	Implications for development	8–33	5
IV.	Framework for Action on Adolescents and Youth	34–37	11
V.	Population programmes to address the challenges of population ageing	38–58	12
VI.	Conclusion	59-66	18

I. Introduction

1. The present report on the monitoring of population programmes, focusing on the changing age structures of populations and their implications for development, has been prepared by the United Nations Population Fund (UNFPA) in response to the topic-oriented and prioritized multi-year work programme of the Commission on Population and Development, which had been endorsed by the Economic and Social Council in its resolution 1995/55. By its decision 2005/1, the Commission decided that the special theme for the fortieth session of the Commission would be "The changing age structures of populations and their implications for development".

2. The report examines the unprecedented transformation of the world population brought about by the transition from high levels of fertility and mortality to low fertility and mortality and the social and economic implications that scenario presents for development. It also describes the programmatic work of the United Nations Population Fund to assist countries in addressing the implications and challenges of changing age structures for the family, community and society. The report describes the Fund's Framework for Action on Adolescents and Youth and uses the occasion of the five-year review and appraisal of progress towards the implementation of the Madrid International Plan of Action on Ageing[1] to focus primarily on the ageing of populations, the challenges this presents and the Fund's response to those challenges.

II. Current demographic situation

3. All countries are experiencing some change in their age structures. However, since countries are at different stages of the demographic transition and experience different social and economic conditions, the change is more pronounced in some countries than in others. Developing countries continue to be characterized by higher levels of fertility and smaller numbers of older persons. These countries typically have a much younger population, with almost 31 per cent under 15 years of age and only 8 per cent aged 60 years or over. Africa has the youngest age distribution, with 41 per cent of the population under age 15 and about 5 per cent aged 60 years and over. Developed countries have a much older population, with 17 per cent under age 15 and 20 per cent aged 60 years or over. The proportion of persons over the age of 60 is increasing rapidly in Western Europe, Northern America and Japan. Just 16 per cent of the population of Europe is under the age of 15 and 21 per cent aged 60 or over.

4. The legacy of past high fertility is the current rapid increase in population and the largest-ever generation of young people. Today, there are almost 1.8 billion young people between the ages of 10 and 24. In developing countries, young people account for 29 per cent of the population, where they number 1.5 billion. In the developed world, there are over 238 million young people, representing 20 per cent of the population. More young people than ever are entering their childbearing and working years. They and their children will ensure that the world population will continue to grow for many years to come.

[1] *Report of the Second World Assembly on Ageing, Madrid, 8-12 April 2002* (United Nations publication, Sales No. E.02.IV.4), chap. I, resolution 1, annex II.

5. The current demographic situation is unique in that it encompasses both the largest population of young people and the largest population of persons aged 60 years and over. In the first decade of the new millennium, global population reached record numbers and proportions in these two segments of the demographic spectrum. The number and proportion of people over age 60 are increasing at an unprecedented rate. Advances in medicine and technology have increased life expectancy and enabled people to live longer than ever before. Combined with lower fertility, the effect is to increase the proportion of older persons in the population. In 2005, just over 10 per cent of the world's population was aged 60 years and over. In developed countries, the proportion of elderly is projected to increase from 20 per cent in 2005 to 32 per cent in 2050. In the developing world, the proportion of the elderly is expected to rise from 8 per cent to 20 per cent during the same period.

6. The demographic transition is taking place at a much faster pace in developing countries and consequently, population ageing is occurring at a more rapid rate in those countries. Developing countries not only have less time to adjust to their growing elderly populations, but they are at much lower levels of economic development than developed countries were when faced with population ageing. Two thirds of all older persons live in developing countries and their numbers and proportions are growing. These are the countries least able to cope with the increasing numbers of elderly.

7. Women comprise by far the greater number and proportion of older persons in almost all societies, and the disparity increases with advancing age. Their greater numbers have important implications for policymakers since the needs of older women, who are typically more vulnerable, must be adequately addressed in a gender-sensitive way. Gender sensitivity is particularly important in the case of health issues that must be addressed throughout the life cycle. Practices that can limit girls' opportunities such as early marriage and pregnancy, and practices that are harmful such as female genital mutilation must be addressed and more positive attitudes towards girls and women, including human rights and equal access to services, must be ensured.

III. Implications for development

8. The changing age structure of populations has significant social and economic implications at the individual, family, community and societal levels. It also has important implications for a country's development.

9. Countries will need to respond to the new realities with appropriate policies and programmes to meet the needs of all age groups in society. This will mean changes in approaches to education, employment, and health care. It will also mean changes in the relationships between generations. The challenge is to meet the needs of both young and old, especially education and health for young people, and social, medical and financial support for the elderly.

10. Young people today are living in a rapidly changing world: changing family structures, rapidly changing norms and social behaviours, increasing urbanization and migration. Very often it is also a world of gender discrimination, armed conflict and human rights abuses. There are pressures from mass media and pressures from peers. Many young people are faced with challenges and risks, including poverty,

early marriage and childbearing, incomplete education, unemployment and the threat of HIV/AIDS. Some face sexual abuse, violence and exploitation.

11. Today's young people come with very diverse experiences, based on the different cultural, social, political and economic circumstances in the communities in which they live. Their health and educational status will determine to a large extent the opportunities that will be open to them. Those opportunities, in turn, will play an important part in the kind of future they can expect to enjoy.

12. Addressing the preceding challenges is an urgent development priority. Attention to the promotion and protection of the rights and socio-economic needs of young people should be an essential element in efforts to eradicate poverty. There are a number of arguments in the case for investing in young people. The most obvious justification for investing in young people is the fact that they account for almost 30 per cent of the population, and the poorer the country, the greater the share of young people in that country's population. As a result, young people need to get their fair share of resources. Investing in young people will contribute towards the achievement of the Millennium Development Goals, especially the Goals pertaining to reducing poverty; achieving universal primary education; promoting gender equality and the empowerment of women; improving maternal health; and combating HIV/AIDS, malaria and tuberculosis.

13. Investing in the health and education of children and then building on this investment in adolescent years brings economic benefits at the macro- and microlevels. A long-term benefit of investing in young people lies in taking advantage offered by the window of opportunity that presents itself during a country's demographic transition to lower population growth. The potential benefits, the "demographic bonus", refers to the moment of opportunity, when fertility and mortality rates are beginning to fall, for Governments to reap the benefits of having a growing cohort of working-age adults relative to the dependent population. Another case in favour of investing in young people relates to the benefits to national security and the contribution of those efforts to a reduction in violence and civil disorder.

14. Providing young people with increased knowledge, opportunities and choices will improve their prospects for healthy, productive and fulfilling lives. Investing in young people's health, education and employment as well as promoting their social and political inclusion and reducing the risks to which they are exposed will yield large returns for generations to come. Failure to act will result in tremendous costs to individuals, societies and the world at large.

15. While the growth of the younger population has been a steady trend, the rapid increase in the numbers of older persons is a twentieth-century phenomenon. The increasing number of elderly in society calls for changes in the way society views population ageing and older persons. It also calls for ensuring the full realization of all human rights and fundamental freedoms for older persons, the empowerment of the elderly, the provision of opportunities for individual development, a commitment to gender equality, the provision of health care, support and social protection and a recognition of the crucial importance of the family.

16. Rapid population ageing brings with it a host of new challenges and requires the development of sound public policy to ensure the fair distribution of resources so that the needs of all age groups in society are adequately met. It also requires

changes in attitudes, policies and practices in order to improve the quality of life of older persons.

17. Until recently, most Governments focused their attention on the growth of the younger generation and little attention was paid to the ever-increasing numbers of older persons. Today, the elderly can no longer be ignored. Public policy must respond to the challenges posed by the individual, family, social, health and economic consequences of population ageing and meet the needs of older persons. The elderly must be included in the development process. Issues relating to older persons must be incorporated into poverty reduction strategies and national development frameworks. Population ageing has important implications for government policies, especially those relating to health care, pension schemes and social security. There are many important issues to address to ensure that the needs of older persons are adequately met, ranging from having access to basic necessities such as food, clothing, shelter and health care to being treated with respect, and feeling wanted and useful.

18. The elderly should not be seen only as a needy and dependent group. Negative stereotypes depicting older persons as frail, disabled, dependent and a burden to society must be replaced with positive images of the elderly. The many contributions of older persons to the family, community and society must be acknowledged, celebrated and promoted. Those contributions reach far beyond work-related activities. Many older persons continue to contribute their time and resources long after they have retired from paid employment. Many of their contributions are not measured in economic terms but are equally important: for example, caring for grandchildren and other family members, housework and household maintenance, productive subsistence work and voluntary activities in the community. By taking care of grandchildren, older persons make it possible for younger women to be employed outside the home, raise household income and secure more resources for education and health care for the family. Older persons are also important vehicles for transmitting culture and traditions to the younger generations. Their experience is invaluable in preparing the future labour force.

19. In many parts of the world, older women, already living in difficult circumstances, are assuming the responsibility of taking care of adult children living with HIV/AIDS and orphaned grandchildren. In fact, older caregivers are the backbone of HIV/AIDS care in Africa. At a time when older persons were expecting to be cared for by their adult children, they are using their meagre financial resources to pay for medication, burials, food, school fees and uniforms. As a result, many older persons who are already poor become destitute.

20. Older persons also play significant roles in emergency and conflict situations, where they are often called upon to assume leadership and to assist in conflict resolution and reconstruction of communities. They are also frequently called upon to assume primary caregiving roles and assist their families and communities in times of conflict.

21. Older persons have traditionally been cared for within the extended family network and by the community at large. They were looked up to with respect and had an important and honoured role in the family. The decline in family size and changing values and cultural practices brought about by the processes of industrialization and urbanization have changed the social fabric of the family, directly affecting the security of its elderly members. Attitudes of children regarding

their duty to care for elderly parents are also rapidly changing. In rural communities, many young people leave the parental home in search of employment in urban areas. With more women working outside the home, there is no one to take care of the elderly. Older family members are increasingly left to care for themselves. More and more older people are left without the financial, social and emotional support of family and relatives. Many of them suffer from malnutrition and a lack of adequate medical care. Not many communities have elder-friendly health-care facilities and social and recreational services. Many older people experience loneliness, isolation and abandonment.

22. In many countries, it is assumed that the family will take care of its elderly members, and government policies and programmes typically focus on the needs of young people and give low priority to the concerns of the elderly. Historically, family planning and infant, child and maternal mortality have been the focus of population policies, and older people's needs were not on the agenda. Older persons are still often neglected by those who promote economic development, health care and education. Even where they exist, social security systems do not always provide adequate coverage for all older persons. In some developing countries, social security is limited to a small minority of the elderly, mostly professional and urban-based.

23. Enhancing the well-being and quality of life of older persons depends on focused policy and programmatic interventions in the following important areas: eradicating poverty, ensuring economic security, promoting lifelong health, promoting active ageing, ensuring equal access to basic health and social services, and eliminating discrimination, violence and abuse of the elderly. According to a 2002 study commissioned by the United Nations Population Fund in India and South Africa, the main concerns of older persons were closely related to conditions associated with extreme poverty — inadequate living conditions, access to health care and social protection, and intergenerational violence and abuse. Older persons identified their priority needs as adequate accommodation, sufficient food, clean water, access to health care and support in caring for their families. Their concerns with growing older centred on fear of isolation, illness, a sense of helplessness, violence and the growing impact of HIV/AIDS.

24. **Eradicating poverty**. Poverty is the main threat to the well-being of the elderly. It is linked to low literacy, poor health and malnutrition. The elderly are consistently among the poorest in all societies. Many of the world's older poor do not have access to basic social services, including health care and adequate shelter. Older women are especially prone to fall into poverty. Many women spend most of their adult lives in child-rearing and homemaking activities or are engaged in the informal sector where they are not covered by pension schemes. Many lack access to financial and legal resources. Once they are widowed, they become even more economically and socially vulnerable. In many parts of the world, widowhood tends to be one of the leading factors associated with poverty and exclusion. The Millennium Development Goal of reducing by half the proportion of persons living in extreme poverty by 2015 will never be achieved if the poverty of older persons is not addressed. It is essential that the concerns of older persons be included in national development frameworks and poverty reduction strategies.

25. **Ensuring economic security**. Economic and social security are essential for the well-being of older persons. It is also very important for independence so that

older persons can age with security and dignity. Even though the lack of necessities and income is felt by all poor people, the elderly poor are hardest hit because they do not have the physical and mental resources that younger and more active adults have. It is therefore especially important to strengthen support systems and implement creative approaches to ensure the material well-being and provision of appropriate social services and welfare coverage for the elderly. It is important to promote programmes to enable all workers, both in the formal and informal sector, to have basic social protection. Social safety nets are particularly important for the more vulnerable elderly, especially the frail and poor, most commonly women. Widows and childless women are especially vulnerable. It is important to focus on women homemakers and widows in basic social protection programmes to address the feminization of poverty.

26. **Lifelong health**. Health and health care are among the most urgent concerns of older persons. It is important to keep in mind that healthy ageing begins early. Opportunities in early life lay the foundation for lifelong well-being. Promotion of sound health and nutrition practices from childhood is essential for people to remain healthy and active in their old age. Although the majority of older persons, especially those in their sixties (the so-called "young-old") enjoy reasonably good health, ageing is accompanied by biological changes that increase the risk of illness and disability. As a result, ageing populations present a major challenge to systems of health care and long-term care. In the majority of developing countries, Governments provide limited health services or medical care so that the various needs of older persons, whether preventive, curative, restorative or rehabilitative, remain largely unmet. Most older persons must depend on their limited savings, if any, or on the support of their adult children or other family members for treatment and health care. Public health services are typically limited in their coverage and are mainly confined to urban areas. Most people in developing countries are not covered by medical insurance which, in most cases, serves those employed in the formal sector.

27. Owing to increasing numbers of older persons and the erosion of family support systems, new arrangements for elder care are needed. It is essential that public policies and programmes address the needs of the older poor who cannot afford health-care services. Older persons should have access to affordable, accessible and appropriate health-care information and services for all ages. They should also have access to information regarding healthy lifestyles and healthy ageing, as well as on the risks and illnesses common to their age group. This should include information on HIV/AIDS.

28. **Active ageing**.[2] Healthy ageing also means promoting active ageing, which allows people to realize their potential for physical, mental and social well-being and participate in society according to their needs and desires. The term "active ageing", adopted by the World Health Organization in the late 1990s, is a more inclusive message than "healthy ageing" and recognizes the factors in addition to health care that affect how individuals age. An active ageing approach is based on the recognition of the human rights of older persons and the principles of independence, participation, dignity, care and self-fulfilment. It shifts strategic planning away from a "needs-based" approach, which assumes that older people are

[2] See World Health Organization, "Active ageing: a policy framework" (WHO/NMH/NPH/02.8) (Geneva, 2002).

passive targets, to a "rights-based" approach, which recognizes the rights of people to equality of opportunity and treatment in all aspects of life as they grow older. Active ageing does not just mean being employed or physically active. It means continuing participation in social, economic, cultural, civic and spiritual spheres. It means lifelong education and training, and the full participation of older persons in community life. Older persons should be given opportunities for individual development and self-fulfilment and should be encouraged to participate in the widest possible range of activities, including employment and community volunteer work. Older persons who are retired or who are living with disabilities can still be active contributors in their families and communities.

29. **Access to services**. For both human rights and economic reasons, older persons should be provided with the same access to basic social and health services, including preventive and curative care and rehabilitation, as other groups. Elder-friendly, dignifying and sensitive health care and services should be designed to meet the special needs of older persons and should include the necessary training of personnel and availability of appropriate facilities. As the older population ages, the numbers of very old people aged 80 and over will increase and so will the need for dependent care for the frail elderly.

30. **Elimination of discrimination, violence and abuse**. Full realization of all human rights of older persons, ensuring full enjoyment of economic, social and cultural rights and a commitment to gender equality were among the central themes of the Madrid International Plan of Action on Ageing. Older persons, especially the poor and women, are more vulnerable to discrimination, abuse and violence. Many suffer from neglect. Others experience physical, psychological, emotional or financial abuse. Policies should support gender equality, be culturally sensitive and protect the human rights of older persons. There is an urgent need for adequate policies and programmes providing support services for abused elderly. There is also a need to build adequate institutional and individual capacity to detect, report and curb elderly abuse.

31. Older persons contribute to development, and they should be included in and benefit from the development process. Efforts to achieve the internationally agreed development goals, including those set out in the Millennium Declaration, should take into account the situation of older persons. The elderly should be encouraged to become involved in decision-making that affects them.

32. **Changing age structures have implications for the economy of a country**. In developing countries, the challenge is to find sufficient resources to provide the necessary social and financial support for older persons, especially the poor, frail and disabled. In developed countries, as the baby boom generation (those born between 1946 and 1964) begins to retire and the workforce decreases in relation to older dependants, the main concern is to replace workers and ensure the sustainability of pension systems. Replacement migration has sometimes been proposed as an answer to the shrinking labour force in developed countries, but it is uncertain whether countries would be willing to relax immigration laws to compensate for the retirement of older workers. The challenge is to strengthen support systems and devise creative approaches to ensure the material well-being and provision of appropriate social services and welfare coverage for older persons, particularly the long-term care of the frail and poor elderly, especially women. The

challenge is especially urgent in developing countries, where few provisions for support exist outside the family.

33. Addressing the needs of older persons requires the creation of enabling and supportive environments to give older persons the option of ageing in place if they do not need and do not wish to leave their homes. This requires affordable, age-friendly housing designs and easy access to necessary goods and services. For the elderly who choose to live with their families, the challenge is to provide adequate shared and multigenerational co-residence options with appropriate housing design. It requires support for the integration of older persons with their families and communities and the promotion of intergenerational solidarity. It also requires improving the availability of accessible, affordable and efficient public transportation for older persons in both rural and urban areas. If older persons cannot be mobile, they will never feel truly independent.

IV. Framework for Action on Adolescents and Youth

34. The United Nations Population Fund has carried on extensive work to address the needs of young people. The Fund's newly released institutional Framework for Action on Adolescents and Youth draws on a vision of a world in which young people's rights are promoted and protected and in which girls and boys have optimal opportunities to develop their full potential and live free of poverty, discrimination and violence. The Framework outlines the Fund's strategic direction in four key areas: (a) creating a supportive policy environment by applying the lens of population structure and poverty dynamics analyses; (b) providing life skills-based education, including comprehensive education on sexuality and relationships; (c) providing sexual and reproductive health services; and (d) supporting young people's leadership and participation.

35. At the policy level, UNFPA places the adolescent and youth agenda within the larger development context of poverty reduction. The Fund engages in policy dialogue, policy analysis and policy advocacy so that young people's issues will be included in national development strategies, the plans and processes of sector-wide approaches, poverty reduction strategies and the Millennium Development Goals. The Fund builds alliances and forges partnerships with Governments, development partners, civil society, youth-serving organizations and the media to leverage resources for investing in young people, especially those who are most vulnerable and socially excluded. UNFPA also benefits from the global focus on HIV/AIDS to highlight policy issues concerning adolescent sexual and reproductive health and place them on the programming agenda.

36. At the programme level, UNFPA advocates for an essential package of social protection interventions for adolescents and youth, comprising education, sexual and reproductive health services and livelihood components. It promotes partnerships to ensure that health and non-health components such as basic education, vocational training and employment receive due policy and programme attention.

37. The Fund is guided in its work by four overarching principles, as follows: (a) the principle of social equity, paying special attention to vulnerable and excluded groups; (b) a rights-based approach, protecting the rights of young people, particularly health, education and participation rights; (c) a culturally sensitive

approach, advocating sexual and reproductive health in sensitive and engaging ways; and (d) a gender perspective, recognizing boys' needs but preserving spaces carved out for girls, especially the poor and vulnerable.

V. Population programmes to address the challenges of population ageing

38. The United Nations Population Fund is engaged in a number of activities designed to address the challenges of population ageing at the global, regional and country levels. The Fund's strategic focus is to influence public policy to respond to the challenges posed by the social, health and economic consequences of population ageing and to meet the needs of older persons, with particular emphasis on the poor, especially women. At the global level, UNFPA facilitates policy dialogue on addressing the implications of population ageing among all stakeholders, advocates for the mainstreaming of ageing issues into national development frameworks and poverty reduction strategies and supports initiatives to improve data, research and institutional capacity for formulating, implementing, monitoring and evaluating population ageing policies and programmes.

39. The Fund also encourages Governments to implement the Madrid International Plan of Action on Ageing to help improve the quality of life of older persons, especially in countries where population ageing is a growing concern. UNFPA works with the International Institute on Ageing (INIA) in Malta to train policymakers and build institutional capacity in the area of population ageing. In preparation for the five-year review of progress towards implementation of the Plan of Action, UNFPA and the Institute designed a new training programme for senior government officials involved in policy and decision-making to strengthen capacity for policy formation, implementation, monitoring and evaluation of progress towards reaching the goals of the Plan of Action.

40. At the regional level, UNFPA works with Governments, United Nations sister agencies, non-governmental organizations, civil society and other stakeholders to advocate for older persons; support the collection of age and sex-disaggregated data for evidence-based policy dialogue, development planning and programme formulation; and encourage the effective implementation of the Plan of Action. For example, in Europe and Central Asia, UNFPA collaborated with the Economic Commission for Europe in the organization of a meeting for national focal points for the implementation of the Plan of Action and on training for country offices and their counterparts. In Asia, the UNFPA Country Technical Services Team in Bangkok works with Governments in the region to help countries address ageing and poverty. The UNFPA Team launched the series *Papers in Population Ageing* to promote and disseminate research to facilitate the review and appraisal of implementation of the Plan of Action. The first issue in the series, "Population ageing in East and South-East Asia: current situation and emerging challenges",[3] provides an overview of population ageing at the regional level and in each country of the region, analyses the causes and assesses the consequences of population ageing, and provides policy recommendations. The UNFPA Team also provides

[3] UNFPA Country Technical Services Team for East and South-East Asia, Papers in Population Ageing No. 1 (Bangkok, United Nations Population Fund, 2006).

technical assistance to its country offices in the preparation of national reviews of the population ageing situation.

41. In Latin America and the Caribbean, UNFPA actively participated in the Inter-Agency Group on Ageing, which included the participation of the Pan American Health Organization (PAHO), the International Labour Organization (ILO), the Inter-Agency Development Bank (IADB), the Economic Commission for Latin America and the Caribbean (ECLAC) and the Department for Economic and Social Affairs. UNFPA provided support to the Latin American and Caribbean Demographic Centre of the Economic Commission for Latin America and the Caribbean and to the countries of the region in the organization and financial support of international conferences and meetings, training courses and advocacy activities, most of them in the framework of the regional projects of UNFPA and ECLAC. The Fund provided support to the Regional Intergovernmental Conference on Ageing: Towards a Regional Strategy for the Implementation in Latin America and the Caribbean of the Madrid Plan of Action on Aging, held in Santiago, Chile, in 2003, in which countries of the region approved the regional strategy for the implementation in Latin America and the Caribbean of the Madrid International Plan of Action on Ageing. In 2004 and 2005 UNFPA supported two subregional meetings on the follow-up to the regional strategy: in a joint effort with PAHO and ECLAC, UNFPA participated as a partner in the expert group meeting on ageing in Central American and Caribbean countries: second forum on policies for older persons, held in San Salvador in November 2004, and in the expert group meeting on ageing in South American countries, held in Buenos Aires in November 2005. UNFPA supported ECLAC in the organization of training courses on indicators of the quality of life of older persons involving 38 professionals from different countries in the region. UNFPA also supported several advocacy activities in joint efforts with ECLAC: the development of advocacy strategies for positioning ageing issues on the national agenda in the Dominican Republic, El Salvador, Nicaragua and Uruguay; and support for the publication of the ageing and development bulletin (two issues per year, from 2005). UNFPA provided support through country offices for the elaboration of national studies on future scenarios for ageing policies and national plans of action in Panama and Uruguay. Through the UNFPA Country Technical Services Team, support has been given for a study on the participatory mechanisms in the design and implementation of national laws and policies on ageing in Argentina, Brazil, Chile and Colombia.

42. At the country level, UNFPA continues to provide directed policy, advocacy and technical support at critical legal, policy, programme and monitoring levels to ensure that population ageing is recognized as an important factor in development and that older persons are involved in the development process and their needs are reflected in national laws. UNFPA encourages its country offices to advocate for, and assist in, the implementation of the Madrid International Plan of Action on Ageing and its review process.

A. Policy formulation

43. Country offices of the United Nations Population Fund are often called upon to assist Governments in formulating policies and national plans on ageing. In Bangladesh, UNFPA has been advocating with the Government through the Asian Forum of Parliamentarians on Population and Development for a policy on the

elderly population, with emphasis on their need for reproductive health services. In Benin, UNFPA was actively involved in the formulation of the National Plan on Active Ageing. In China, UNFPA is providing support for a review and participatory appraisal of the implementation of the existing Law of the People's Republic of China on Protection of the Rights and Interests of the Elderly (Law No. 73 of 29 August 1996), which is scheduled to be revised in 2007. In the Dominican Republic, the process of establishing a National Council for Older Persons started from 2005, with UNFPA support, to regulate the implementation of the national law of 1998. In Guatemala, UNFPA supports the national ageing committee, and the Fund works to create awareness among policymakers of the importance of including the concerns of older persons in development plans and programmes; to improve the quality of life of older persons; and to provide assistance to those in need. The Fund played an active role in the formulation of the national policy for the ageing population and coordinates efforts with the public sector and civil society to pass a law that grants more benefits to older persons. A gerontological plan is being developed at the national level that includes education, health, rehabilitation and productive activities. UNFPA supported such activities as the training of persons who care for the elderly and the creation of day-care centres for older persons. The Fund works to address the problems of education, training, health, housing and food for the elderly.

44. In the Lao People's Democratic Republic, UNFPA seeks to ensure provision of health-care services for older persons; strengthen family and community support systems; provide job opportunities, appropriate income and education; protect older persons from discrimination and violence; and make people aware of issues associated with ageing. The Fund supported the development and dissemination of the first national policy towards the elderly in the Lao People's Democratic Republic. In Malaysia, UNFPA works to promote active and productive ageing and increased participation of older Malaysians by undertaking a number of activities in the area of policy, research, data collection, capacity-building and advocacy. The Fund is reviewing existing legal provisions in order to make recommendations to encourage increased employment of the elderly; preparing a situation analysis report to facilitate the study on productive ageing; surveying older persons to gather information on their occupational skills, expertise, attitude and readiness to join the workforce; surveying prospective employers to explore possibilities and obstacles in the hiring of older workers; identifying employment gaps where older Malaysians can be suitably engaged; reviewing the capacity of existing training facilities for the elderly; and proposing expansion of existing retraining programmes to create greater opportunities for re-entry into the labour force for older workers. The Fund is also conducting awareness campaigns among employers, older persons and other stakeholders to promote lifelong learning.

45. In Nicaragua, UNFPA supports the Ministry of the Family in the formulation of a national elderly policy. Similar support was given to the Ministry of Youth, Women, Children and Family Affairs in Panama. The Fund provides support to an interuniversity group to coordinate actions of a task force on the elderly. It also supports the population and development commission of the National Assembly to review and update the legal framework pertaining to the elderly.

46. In Romania, UNFPA activities aim at achieving an enhanced national capacity for the effective formulation, planning and implementation of population policies, including those related to population ageing. The Fund supported the establishment

and the first meeting of the National Commission for Population and Development, which addresses specific population issues such as ageing, negative population growth, low fertility and migration, and ensures that population policy formulation and implementation are based on human rights and gender equity. The Fund is currently working with Romanian parliamentarians to raise awareness of population issues, including ageing, and to implement activities in this area. UNFPA supported a national expert meeting in which main population issues and possible policy options were identified, including ageing, and plans to organize a workshop on ageing were put forward.

47. In the Russian Federation, at the request of the President's Administration and in cooperation with experts from Government and academic institutions, UNFPA organized a seminar on the challenges and strategic approaches to low fertility in the country, which has resulted, inter alia, in population ageing. In Uganda, UNFPA worked closely with the Government to formulate and promulgate a population policy that includes a full section on the elderly. The policy aims at the following: (a) increasing awareness among the public of the needs of the elderly; (b) providing the elderly with appropriate facilities, amenities and skills to enhance their contribution to the national economy; (c) training community-based personnel to meet the special needs of the elderly; (d) expanding meaningful pension, social security and other appropriate community-based schemes for the elderly; (e) enhancing and enforcing laws to address the rights and needs of the elderly; and (f) establishing a national advisory council on the elderly.

48. In Viet Nam, the Fund works to enhance knowledge of population-ageing issues and policy responses among policymakers and government leaders and to strengthen the policy framework relating to care and interventions. The Fund supported the Ministry of Labour, War Invalids and Social Welfare and the National Committee for the Elderly in the development of the National Programme of Action on Ageing.

B. Data collection and research

49. The Fund supports the collection of data and research on older persons for evidence-based policy formulation and programme implementation. In Benin, UNFPA supported the collection of data on older persons, including a database of census information on older persons and a special census volume on the elderly. In Bolivia, UNFPA supports the analysis of socio-demographic data of the elderly. In Cambodia, UNFPA commissioned a survey on older persons that resulted in a report providing a profile from the 2004 survey of the elderly in Cambodia, which is available in both Khmer and English for policymakers, planners and interested stakeholders in the country. More focused analyses to examine the impact on the elderly of the Khmer Rouge era and its aftermath and of recent deaths of adult children, including those due to AIDS, and knowledge and awareness related to AIDS are planned for inclusion in future reports, as are more detailed examinations of the health and socio-economic well-being of the elderly. In Mauritania, UNFPA funded a study on the elderly population as part of census data analysis. In Mongolia, UNFPA supported the preparation of a monograph on the elderly based on census data.

50. In Nicaragua, UNFPA supports the analysis of socio-demographic data of the elderly. In Romania, UNFPA provided financial assistance to the Gender and Generations Survey. In the Russian Federation, UNFPA supports the Family and Fertility Survey and research studies on demographic issues, including low fertility and the resulting ageing of the population. In Thailand, the UNFPA programme seeks to identify issues related to population ageing by gathering demographic, socio-economic and sociocultural data, and information on health, services, policy, law enforcement, social security/rights and other related factors affecting older persons; strengthen capacity of relevant bodies to support older people; and improve the quality of life of older people through interventions, policy and advocacy. UNFPA commissioned a study to examine the impact of HIV/AIDS on the economic, social, health and emotional status of older persons and supports a project on HIV/AIDS and older persons that seeks to influence the national AIDS prevention and control body to include the needs and concerns of older people affected and infected by HIV/AIDS. Efforts are under way to establish a database of older persons who are affected and infected by HIV/AIDS in selected villages to provide evidence to policymakers of the magnitude of the problem. A study was undertaken to identify emerging issues arising out of population ageing in Thailand and to review the national polices, plans and services for older people and their implementation.

51. In Uganda, UNFPA funded the collection of data on the health care of elderly women and provided substantial support to the Uganda 2002 Population and Housing Census that has information on the socio-economic situation of the elderly. UNFPA also sponsored activities of the Uganda Reach the Aged Association aimed at advocating for improved programming for older persons.

52. In Ukraine, UNFPA conducted, in collaboration with the State Statistics Committee of Ukraine and the Institute of Gerontology of the Academy of Medical Sciences of Ukraine, a situational analysis on population ageing in Ukraine: some demographic, socio-economic and medicare issues, which provided recommendations for effective policies to respond to the challenges of population ageing. UNFPA supported a comprehensive demographic study of Ukraine that highlighted the demographic issues of population ageing in the country. Based on that study, a strategy for addressing the negative consequences of population ageing in Ukraine was developed for the Government. The current UNFPA country programme seeks to involve older persons in community life through the development of a volunteer movement among older persons that would contribute to improving their quality of life and to the development of sectoral policies on ageing. Activities include, inter alia, the development of training modules, workshops and a manual for volunteers as well as procurement of educational equipment for regional volunteer centres.

C. Capacity-building

53. The Fund also promotes capacity-building by supporting training institutes and by providing technical assistance to Governments and other stakeholders upon request. In Bangladesh, UNFPA supports the participation of Government and NGO officials in international meetings and seminars on issues related to ageing and sponsors participants attending training courses at the International Institute on Ageing. In China, UNFPA is working with HelpAge International and the China

National Committee on Ageing to implement activities in six pilot sites throughout the country. The project supports strengthening government capacity to formulate and implement evidence-based strategic plans and policies on ageing, with special emphasis on active and healthy ageing. It will contribute to improved understanding of issues related to population ageing among policymakers and increased political support at national and local levels for policies and programmes dealing with ageing. To help planners and policymakers in Ethiopia to reflect the needs of the elderly in national programmes, UNFPA has been sponsoring the participation of policymakers in training programmes and workshops organized by the International Institute on Ageing. In India, UNFPA supports the training of government officials at the Institute and at the international workshops on preparing for ageing societies, held at Columbia University in New York.

54. In Nicaragua, as well as in many other Latin American countries, UNFPA supports the participation of national professionals in international conventions and courses in gerontology and geriatrics. In the Lao People's Democratic Republic, UNFPA assisted in the screening and selection of candidates for the south-to-south cooperation short training course on the promotion of the elderly's well-being and community participation towards healthy ageing. In the Russian Federation, UNFPA offers funding for training in population ageing at the International Institute on Ageing and other institutions. In Ukraine, UNFPA took part in a policy workshop on the implementation of the Madrid International Plan of Action on Ageing organized by the Supreme Council of Ukraine and the United Nations Programme on Ageing. In Uganda, UNFPA worked with the Uganda Reach the Aged Association, the African regional development centre of HelpAge International, to fund the training of policymakers and UNFPA staff in the field of population ageing. In Viet Nam, UNFPA sponsored the training of a number of government officials and UNFPA staff at the International Institute on Ageing.

55. A number of UNFPA country offices in Eastern European and Central Asian countries supported the participation of their national counterparts in a meeting of national focal points for the implementation of the Madrid International Plan of Action on Ageing.

D. Advocacy

56. In Bangladesh, the UNFPA office provides grants to the Bangladesh Association for the Aged and Institute of Geriatric Medicine for the production of posters and the convening of discussion meetings to observe the International Day of Older Persons each year. The UNFPA country office in Bangladesh maintains close relations with the forum for rights of the elderly, Ageing Resource Centre. In Ethiopia, UNFPA has been supporting the network of the Ethiopian elders and pensioners association to celebrate the International Day of Older Persons to promote community awareness regarding the challenges, needs and contributions of the elderly. In Nicaragua, UNFPA supports the national council of the elderly to plan and implement advocacy work. In the Russian Federation, UNFPA seeks to raise awareness among policymakers of issues related to population ageing. The Fund supports the training of a regional network of journalists on population issues, including low fertility and ageing. In Turkmenistan, UNFPA organized the observance of the International Day of Older Persons in collaboration with the Ministry of Social Security. UNFPA has been at the forefront of activities to raise

awareness of the issue of ageing and of the need to address the special needs of the elderly.

57. UNFPA encourages cooperation and coordination and the exchange of best practices. In Benin, UNFPA supported the organization of a number of meetings and workshops at the national level and provided technical and financial support for the country's participation in the Second World Assembly on Ageing.

58. A number of UNFPA country offices are not undertaking any activities related to population ageing and older persons at the present time because ageing issues are not considered a priority in the country for a number of reasons: the small proportion of elderly in the population, the importance of other issues such as those concerning young people, a lack of political will, insufficient funds, political turmoil or a lack of solid population data. Some country offices plan to include ageing issues in their country programmes in the near future. For example, in Pakistan, UNFPA plans to include ageing-related activities as a key factor in planning and development, as well as for social protection, especially in the areas of policy and advocacy. In Tonga, UNFPA plans to undertake a study linking ageing to poverty as soon as the latest census data become available for analysis. Other country offices are waiting for the results of the next census to initiate discussions about a national policy on ageing.

VI. Conclusion

59. The current demographic situation, with the historically largest populations of both young people and elderly, calls for appropriate policies and programmes to address the concerns of all age groups in society. The challenge is to distribute limited resources to ensure that the needs and rights of both young and old are adequately met.

60. A good strategy for policy and programmatic support to ensure a society for all ages should take into account the following important areas: policy dialogue, capacity-building, data collection, research and advocacy.

A. Policy dialogue

61. Policy dialogue between and within Governments, the United Nations system, non-governmental organizations, civil society and the private sector is essential to raise awareness among all stakeholders of the changing age structure of populations, especially of the large number of young people and the speed of population ageing, and the health and social implications of those changes for individuals, families and societies. Such dialogue should seek to facilitate policy development and programme planning in order to assist concerned groups in formulating comprehensive approaches to addressing the challenges of young people and population ageing and to meeting the needs of both young and old, especially the most vulnerable, including the poor and frail, particularly women. It is essential that national development policies incorporate both youth and ageing issues into social and economic planning. The issues of both groups must be mainstreamed in national development agendas and poverty reduction programmes. Young people and older persons should be encouraged to participate in decision-making that affects them.

B. Capacity-building

62. Strengthening the national capacity of developing countries to address the challenges of youthful populations and population ageing and to meet the needs of both young and old is essential. Policymakers and programme managers should have adequate training to be able to mainstream youth and ageing issues into social and economic planning to ensure that both young people and older persons are part of the development process and share in its benefits.

C. Data collection

63. There is an urgent need for reliable and timely data disaggregated by age, sex, socio-economic status and health status, for evidence-based policy formulation and programme planning, monitoring and evaluation. Both qualitative and quantitative data gathered from a variety of sources, including censuses, surveys, interviews and focus group discussions, will enhance understanding of the challenges of changing age structures. Qualitative data should take into account the voices of both young and old people themselves.

D. Research

64. There is a need to encourage and advance culture- and gender-sensitive research on youth and on population ageing to identify emerging issues and provide evidence for effective policies. In the area of population ageing, such research can include studies on the social, economic and cultural implications of population ageing; the sociocultural aspects of ageing; the link between population ageing and socio-economic development; poverty and the socio-economic vulnerability of the elderly; the impact of HIV/AIDS on older persons; living arrangements of older persons; changing family structures; older persons in conflict situations; and elder abuse, neglect, discrimination and exploitation. Dissemination of data and research findings as well as exchange of experiences, lessons learned and best practices are important components of institutional capacity-building for research.

E. Advocacy

65. Meeting the challenges of both young and old requires advocacy work to ensure that young people as well as older persons are included in the development process. Awareness-raising should include reaching out to both governmental and non-governmental constituencies. It should draw attention to the unprecedented numbers of young people and to the speed and implications of population ageing, with a focus on the needs of both groups and especially on women. Ageing issues should be promoted within the context of lifelong health and well-being. Awareness-raising should underscore the need to respect the human rights of young and old.

66. Solidarity between generations at all levels — in families, communities and nations — is fundamental for the achievement of a society for all ages, one in which no age group is forgotten. Intergenerational solidarity is also essential for social cohesion and as a foundation for formal public welfare and informal care systems. At the family and community level, intergenerational ties are valuable for everyone.